

SEP 21 2004

PTO/SB/21 (09-04)

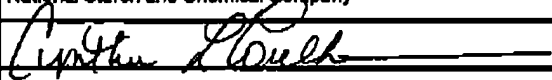
Approved for use through 07/31/2008. OMB 0651-0031

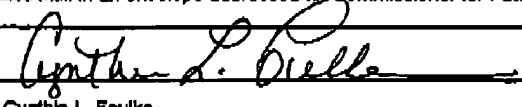
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/633,279	
	Filing Date	August 20, 2001	
	First Named Inventor	Lie-Zhong Gong	
	Art Unit	1733	
	Examiner Name	John L. Goff II	
Total Number of Pages in This Submission	24	Attorney Docket Number	1941.PKG

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): copy of 2004/0166309A1
Remarks _____ To Fax No. 703-872-9306		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	National Starch and Chemical Company	
Signature		
Printed name	Cynthia L. Foulke	
Date	September 21, 2004	Reg. No. 32,364

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature		
Typed or printed name	Cynthia L. Foulke	Date September 21, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (10-03)

Approved for use through 07/31/2008. CMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)18.00

## Complete if Known

Application Number 09/933,279  
 Filing Date Aug. 20, 2001  
 First Named Inventor Lie-Zhong Gong  
 Examiner Name John L. Goffo  
 Art Unit 1733  
 Attorney Docket No. 1941 PKA

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit  
Account  
Number  
Deposit  
Account  
Name14-0455

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Credit any overpayments☐ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 180	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$)			

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** = <u>1</u> X <u>1P</u>	<u>1P</u>	<u>18.00</u>
Multiple Dependent	-3** = <u>  </u> X <u>  </u>	<u>  </u>	<u>  </u>

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 88	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$)18.00

\*\*or number previously paid, if greater. For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	1052 50	2052 25	Surcharge - late filing fee or oath	
1053 130	2053 130	1812 2,520	2052 25	Surcharge - late provisional filing fee or cover sheet	
1812 2,520	2053 130	1804 920*	2052 25	Non-English specification	
1804 920*	2053 130	1805 1,840*	2052 25	For filing a request for ex parte reexamination	
1805 1,840*	2053 130	1251 110	2052 25	Requesting publication of SIR prior to Examiner action	
1251 110	2053 130	1252 420	2052 25	Requesting publication of SIR after Examiner action	
1252 420	2053 130	1253 950	2052 25	Extension for reply within first month	
1253 950	2053 130	1254 1,480	2052 25	Extension for reply within second month	
1254 1,480	2053 130	1255 2,010	2052 25	Extension for reply within third month	
1255 2,010	2053 130	1401 330	2052 25	Extension for reply within fourth month	
1401 330	2053 130	1402 330	2052 25	Extension for reply within fifth month	
1402 330	2053 130	1403 290	2052 25	Notice of Appeal	
1403 290	2053 130	1451 1,510	2052 25	Filing a brief in support of an appeal	
1451 1,510	2053 130	1452 110	2052 25	Request for oral hearing	
1452 110	2053 130	1453 1,330	2052 25	Petition to institute a public use proceeding	
1453 1,330	2053 130	1501 1,330	2052 25	Petition to revive - unavoidable	
1501 1,330	2053 130	1502 480	2052 25	Petition to revive - unintentional	
1502 480	2053 130	1503 640	2052 25	Utility issue fee (or reissue)	
1503 640	2053 130	1480 130	2052 25	Design issue fee	
1480 130	2053 130	1807 50	2052 25	Plant issue fee	
1807 50	2053 130	1806 180	2052 25	Petitions to the Commissioner	
1806 180	2053 130	8021 40	2052 25	Processing fee under 37 CFR 1.17(q)	
8021 40	2053 130	1809 770	2052 25	Submission of Information Disclosure Stmt	
1809 770	2053 130	1810 770	2052 25	Recording each patent assignment per property (times number of properties)	
1810 770	2053 130	1801 770	2052 25	Filing a submission after final rejection (37 CFR 1.129(e))	
1801 770	2053 130	1802 900	2052 25	For each additional invention to be examined (37 CFR 1.129(b))	
1802 900	2053 130		2052 25	Request for Continued Examination (RCE)	
	2053 130		2052 25	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

## SUBMITTED BY

Name (Print/Type)

CYNTHIA L. FOULKERegistration No.  
(Attorney/Agent)32,364

(Complete if applicable)

Telephone

908-685-7433

Signature

Cynthia L. Foulke

Date

Sept 21, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

**This Page is Inserted by IFW Indexing and Scanning  
Operations and is not part of the Official Record**

## **BEST AVAILABLE IMAGES**

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images include but are not limited to the items checked:

- ☐ **BLACK BORDERS**
- ☐ **IMAGE CUT OFF AT TOP, BOTTOM OR SIDES**
- ☐ **FADED TEXT OR DRAWING**
- ☐ **BLURRED OR ILLEGIBLE TEXT OR DRAWING**
- ☐ **SKEWED/SLANTED IMAGES**
- ☐ **COLOR OR BLACK AND WHITE PHOTOGRAPHS**
- ☐ **GRAY SCALE DOCUMENTS**
- ☐ **LINES OR MARKS ON ORIGINAL DOCUMENT**
- ☐ **REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POOR QUALITY**
- ☐ **OTHER:** \_\_\_\_\_

**IMAGES ARE BEST AVAILABLE COPY.**

**As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.**